

APPLICATION DATE						
NEIGHBORHOOD ORGAN	IIZATION					
NAME OF APPLICANT						
APPLICANTS ADDRESS_						
CITY	ST	ZIP CODE	PHONE #			
FAX #		E-MAIL ADDRESS				
		DSE:				
HISTORICAL AND PF						
EVENT DATE				END TIME		
		REMOV	AL DATE AND TIME	E		
ANTICIPATED ATTEN	NDANCE:					
STREET TO BE CLOSED:		(LIMITS – LIST CROSS STREET INTERSECTIONS)				
STREET		FROM		ТО		
I prefer my permit to be:	☐ Mailed	☐ E-mailed	☐ Fax	ed [Ready for pick up at office	
Neighborhood organizatio Outdoor Events Ordinanc		understands the rules, regula 10.	tions and terms ar	nd agrees to abide by	all requirements of the	
Signature of neighborhoo	d representative		Dat	e		
EVENT HOLDER IS RESP	ONSIBLE FOR PI	ROVIDING STANDARD TYPE T ADULT AT LEAST 18 YEARS O			DURING EVENT. MUST WEAR SAFETY VESTS.	
ACCESS TO CLOSED STF EMERGENCY.	REETS MUST BE	PROVIDED FOR EMERGENC	Y VEHICLES (AMB	ULANCE OR FIRE TR	RUCK) IN CASE OF AN	
		S REQUIRED ALONG CLOSE OWED IN THE UNOBSTRUCT				

PUBLIC EVENTS DEPARTMENT OUTDOOR EVENTS MANAGER 1201 HOUSTON STREET FORT WORTH, TX 76102 (817) 392-7894 FAX (817) 392-2756



Neighborhood Event Petition

Event date:	Purpose of event:	# o	homes on street:
Street to be closed:	From:	To:	
Closure date:	Times - Begin	AM PM End	AM PM
Event Coordinator:			
Pnone:	E-mail:		
		e neighborhood event to be hents will be allowed access to	
Resident's sign	ature	Address	
			
			
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